

**FORM
5A**
Rev
02/08

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:
2286768

Date Received:
01/06/2012

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: <u>54380</u>	4. Contact Name: <u>DAVID BLANDFORD</u>
2. Name of Operator: <u>MATRIX ENERGY LLC</u>	Phone: <u>(970) 247-1959</u>
3. Address: <u>1241 THOROUGHbred ROAD</u>	Fax: <u>(370) 247-2359</u>
City: <u>DURANGO</u> State: <u>CO</u> Zip: <u>81303</u>	

5. API Number <u>05-123-33757-00</u>	6. County: <u>WELD</u>
7. Well Name: <u>KUETTEL</u>	Well Number: <u>14-10-16</u>
8. Location: QtrQtr: <u>SWSW</u> Section: <u>10</u> Township: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u>	
9. Field Name: <u>WATTENBERG</u> Field Code: <u>90750</u>	

Completed Interval

FORMATION: CODELL Status: PRODUCING

Treatment Date: 09/23/2011 Date of First Production this formation: 11/17/2011
Perforations Top: 7204 Bottom: 7214 No. Holes: 40 Hole size: 41/100

Provide a brief summary of the formation treatment: _____ Open Hole:

FRAC'D WITH 3723 BBLs SLICK WATER AND VISTA 22 GEL AND 251040# SAND. ATP 3892 PSI. ATP 26.6 BPM. ISDP 3762 PSI.

This formation is commingled with another formation: Yes No

Test Information:

Date: 11/19/2011 Hours: 24 Bbls oil: 98 Mcf Gas: 525 Bbls H2O: 0
Calculated 24 hour rate: Bbls oil: 98 Mcf Gas: 525 Bbls H2O: 0 GOR: 5357
Test Method: FLOWING Casing PSI: 1880 Tubing PSI: _____ Choke Size: 12/64
Gas Disposition: SOLD Gas Type: WET BTU Gas: 1303 API Gravity Oil: 54
Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____
Bridge Plug Depth: _____ Sacks cement on top: _____

FORMATION: NIOBRARA Status: PRODUCING

Treatment Date: 09/24/2011 Date of First Production this formation: 11/17/2011
Perforations Top: 6952 Bottom: 7070 No. Holes: 80 Hole size: 41/100

Provide a brief summary of the formation treatment: _____ Open Hole:

FRAC'D WITH GAL 15% HCL, 6112 BBLs SLICK WATER AND 205180# SAND. ATP 4609 PSI. ATR 54.5 BPM. ISDP 356 PSI.

This formation is commingled with another formation: Yes No

Test Information:

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____
Calculated 24 hour rate: Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____
Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____
Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____
Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: _____

Date formation Abandoned: _____ Squeeze: Yes No If yes, number of sacks cmt _____
Bridge Plug Depth: _____ Sacks cement on top: _____

Comment: _____

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.
Signed: _____ Print Name: DAVID M BLANDFORD

Attachment Check List

Att Doc Num	Name
2286768	FORM 5A SUBMITTED
2286769	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	On hold to discuss production reporting with opr.	3/28/2012 3:17:51 PM

Total: 1 comment(s)